



TRANSMITTAL FORM

Application Serial Number	09/300,137
Filing Date	4/27/99
First Named Inventor	Lazarus
Group Art Unit	2834
Examiner Name	Budd, M.
Attorney Docket No.	ACX-103CN2CP2
BATCH NO. (after allowance)	Not applicable
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

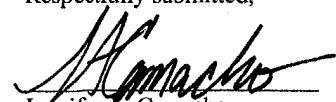
<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] 	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input checked="" type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations 	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate) 	

CORRESPONDENCE ADDRESS

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 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
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Respectfully submitted,


 Jennifer A. Camacho
 Attorney for Applicant(s)
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

FEE TRANSMITTAL
FY 2001
MAR 8 2001
Complete if Known

Application Serial Number	09/300,137
Filing Date	4/27/99
First Named Inventor	Lazarus
Group Art Unit	2834
Examiner Name	Budd, M.
Attorney Docket No.	ACX-103CN2CP2

METHOD OF PAYMENT

1. Payment Enclosed:
 - Check Money Order Other
2. The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
 - Required Fees (copy of this sheet enclosed).
 - Additional fee required under 37 CFR 1.16 and 1.17.
 - Overpayment Credit.
3. Applicant claims small entity status.

FEE CALCULATION (continued)
3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for reexamination	
110	55	Extension for reply within first month	
390	195	Extension for reply within second month	
890	445	Extension for reply within third month	890.00
1,390	695	Extension for reply within fourth month	
1,890	945	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
130	130	Petitions to the Commissioner	
50	50	Petitions related to provisional applications	
180	180	Submission of Information Disclosure Statement	
710	355	Filing a submission after final rejection (37 CFR 1.129(a))	
710	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (Specify)			
Other fee (Specify)			

FEE CALCULATION
1. FILING FEE
Large Entity

Fee (\$)	Fee Description	Fee Paid
710	Utility filing fee	
320	Design filing fee	
150	Provisional filing fee	

Total Claims	Number Filed	Number Extra	Rate	Amount
	- 20 =		x \$ 18.00 =	

Independent Claims	- 3 =	x \$ 80.00 =
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<input type="checkbox"/> Multiple Dependent Claim(s), if any	\$270.00 =
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**TOTAL:
SMALL ENTITY DISCOUNT:
SUBTOTAL (1) (\$)**

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
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SUBTOTAL (3) (\$) 890.00

Total	- =	x \$ 18.00 =
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Indep.	- =	x \$ 80.00 =
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SUBTOTAL (2) 0.00

<input type="checkbox"/> First Presentation of Multiple Dep. Claim	+ \$270.00 =
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TOTAL (\$) 890.00

CORRESPONDENCE ADDRESS

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Respectfully submitted,

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AF/11
GP2834
PATENT
Attorney Docket No. ACX-103CN2CP2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Lazarus et al.

SERIAL NO.: 09/300,137 GROUP NO.: 2834

FILING DATE: 4/27/99 EXAMINER: Budd, M.

TITLE: Packaged Strain Actuator

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC 20231 on this 5th day of March, 2001.


Wendy Martin

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith is/are: Transmittal Form (1 pg.); Fee Transmittal (1 pg.);
Amendment and Response (13 pgs.); Petition for Extension of Time (1
pg.); Check in the amount of \$890.00; Return Receipt Postcard

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